

Bowel cancer screening- Having a colonoscopy

What is the aim of this leaflet?

This leaflet gives you information about how a colonoscopy is carried out, and explains the benefits and risks of having the procedure. It aims to help you make an informed choice about having a colonoscopy.

What is a colonoscopy?

- A colonoscopy looks at the lining of the entire large bowel. It is the most effective way of diagnosing bowel cancer. People who receive a positive FIT screening result will generally be referred for a colonoscopy.
- A thin flexible tube with a tiny camera on the end called a colonoscope is passed into your rectum (back passage) and guided around your large bowel. Usually a pain relieving medication (fentanyl) is given intravenously and if needed or wanted sedating medication (midazolam).
- During this examination if any abnormalities are found, these may be removed during this examination and sent to the laboratory for further tests.
- Treatments for bowel cancer are more likely to be effective if it is detected early.
- A colonoscopy takes about half an hour and will require a Day Patient appointment. You shouldn't need to stay in hospital for more than a few hours.

Why have I been offered a colonoscopy?

Everyone who has a positive FIT result after completing the test for bowel cancer screening will be invited to discuss having a colonoscopy. If colonoscopy is not suitable then you may be offered alternative investigations.

- Before you have the procedure, a specialist nurse will fully explain what colonoscopy involves. You will be given the opportunity to ask any questions, and your fitness for the procedure will be assessed. Please bring a list of all your medications along.
- You will be asked to sign a consent form giving permission to have the procedure performed.
- A positive screening result (traces of blood found in your stool or poo sample) can be due to reasons that are not related to cancer, such as haemorrhoids or piles (swollen veins in or around your back passage) and anal fissures (tears in the lining of the rectum or near the back passage) sometimes caused by constipation.
- The main reason you have been offered a colonoscopy is to examine the lining of your bowel wall to see where any blood may be coming from and if there are any

abnormalities these may be removed during this examination. These will then be sent to the laboratory for examination and the results will be sent to you (and your GP) and you will be notified of any further tests or follow up that may be recommended.

- A colonoscopy can also detect bowel polyps (small growths). Polyps are not cancer, but can sometimes change into cancer over a number of years. Polyps can be removed (usually during the colonoscopy), this may reduce your risk of developing bowel cancer in the future.

What do I have to do before the colonoscopy investigation?

It is very important that you read and follow the bowel preparation instructions carefully. If the large bowel is not cleared effectively, the colonoscopy may need to be repeated.

At your appointment with the nurse, you will be given all the information you will need but this may include the following actions:

- To visit a chemist to obtain the prescribed strong laxative to take the day before the procedure. It is wise to stay close to a toilet and avoid travelling or going to work as once the medication works you will have very loose stools and will need the toilet quite frequently.
- To completely empty your bowel to allow the doctor to clearly see the lining of your bowel.
- To arrange for someone to take you home after your colonoscopy. If you were given a sedative it is not legal to drive for 24 hours as you may still be drowsy.

What happens during the colonoscopy?

You will be monitored throughout the procedure

- A nurse will be with you at all times.
- You will be asked to lie on your left side and will be given a pain relieving drug and can also have a sedative if needed to help you relax.
- Your heart rate and blood pressure will be monitored throughout the procedure.
- The doctor passes the scope (colonoscope) through your rectum (back passage) and into your bowel.
- A biopsy (a small sample of the lining of your bowel) may be taken during the procedure to be sent to the laboratory for more tests.
- Similarly, any polyps may be removed painlessly during the examination. Polyps are small growths which are not cancers and often benign, but if left in the bowel can sometimes grow over time into cancers.
- Air will be passed into the bowel via the scope which can cause some cramping but this usually passes quickly.
- When the procedure is finished the scope is removed.

When do I get my results and what do they mean?

- You will be given results before you leave the hospital. The consultant will discuss the results of the procedure with you. We recommend your accompanying relative

or friend is present as the sedation can affect your ability to remember the discussion. A copy of the colonoscopy report will be given to you to take home and a copy will also be sent to your GP.

- If your colonoscopy is normal (no abnormalities found), you will be offered screening for bowel cancer again in two years' time.
- If your colonoscopy is abnormal (polyps or abnormal tissue found), further procedures or more regular surveillance may be necessary. The consultant will explain the process for further appointments and next steps.

If cancer is detected, you will be referred for further investigations and treatment. There is a 90% chance of bowel cancer being successfully treated, if it is detected at the earliest stage. However, not all bowel cancers detected at colonoscopy can be successfully treated.

What happens after the colonoscopy?

- Immediately afterwards, you may want to pass wind. This is normal, and perfectly safe.
- You will receive your result letter within three weeks of the colonoscopy.
- If tissue samples were removed, you may notice traces of blood coming from your back passage. Slight bleeding like this is not uncommon and may last for a few days.
- You should report any symptoms of prolonged or heavy bleeding (such as cramping, stomach pains and heavy bleeding from your back passage) to the Day Patient Unit or your GP.
- Do not drive, use machinery, sign legal papers or drink alcohol for at least 24 hours. Have a friend or relative accompany you home after the procedure. The sedative takes some time to get through your system and may have some effects on your reactions and judgement.

Are there side effects or complications from having a colonoscopy?

- As with any medical procedure, colonoscopy has a small risk of complications. Serious complications of colonoscopy are uncommon at less than one in five hundred examinations.
- Complications can include a reaction to the bowel preparation or medication used for sedation, heart or lung problems, an infection, bleeding from the bowel and/or perforation of the bowel (hole in the bowel).

Post-procedure symptoms

If any of the following happen **within 48 hours** after your colonoscopy please consult your GP or go to the Emergency Department:

- Severe abdominal pain (not just wind cramps).
- A firm, bloated abdomen.
- Vomiting.
- Fever or high temperature.
- Rectal bleeding or a sudden passing of a large amount of blood from your back passage.

More information and support

If you have any questions, or would like more information about screening for bowel cancer or colonoscopy, you can:

- Contact the Bowel Screening Programme on 707740
- Talk to your GP
- Visit the Bowel Cancer Screening Programme website at www.gov.gg/screening
- Visit Bowel Cancer Guernsey at www.bowelcancerguernsey.org
- Visit healthy living at www.gov.gg/healthyliving
- Visit Cancer Research UK at www.cancerresearchuk.org/about-cancer/bowel-cancer

KEY MESSAGES/POINTS TO REMEMBER:

- Tell the specialist nurse about any health conditions.
- Follow the bowel preparation instructions carefully.
- Arrange for a friend or family member to bring you to your appointment and collect you and take you home after the procedure.
- If you are unable to keep your appointment please notify us as soon as possible.
- If you have any problems with persistent abdominal pain or bleeding after your colonoscopy, please ring Day Patient Unit until 7.00 pm on the day of your procedure or contact the Emergency Department (ED) immediately informing them that you have had a colonoscopy.

CHECKLIST

- Are you able to keep your appointment? If not, have you phoned the office on 707740 to cancel or change it?
- Are you worried or do you have any questions to ask? You can call 707740 and someone will be able to help.
- Have you taken your bowel preparation (laxative) and drunk adequate amounts of clear fluids?
- If you are having sedation, have you arranged for an adult to take you home and look after you for 24 hours?

Thank you for taking the time to read this leaflet – if there is anything at all that you don't understand, or you have any questions, please call us on 707740